



NOV 12 2004 00:16 FROM: HONEYWELL 3107919122

TO: 817037464000

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7590 08/13/2004

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FAISAL ADNAN		(Depositor's name)
<i>FAISAL ADNAN</i>		(Signature)
11/12/04		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/618,515	07/11/2003	Gary Vrba	H0004R51	6594

TITLE OF INVENTION: TURBOCHARGER COMPRESSOR WITH NON-AXISYMMETRIC DESWIRL VANES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	11/15/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
RICHTER, SHELDON J	3748	060-612000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee name will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 11/15/2004 MAHMED2 00000106 011125 10618515

(A) NAME OF ASSIGNEE

HONEYWELL INTERNATIONAL, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

01 FC:1501	1370.00 DA
02 FC:1504	300.00 DA
03 FC:8001	3.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies 1 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-1625 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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11/12/04

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